THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) Yes, Sir.

(b) No, Sir. The function of the said dispensary has not collapsed and the equipment for checking blood pressure is available.

(c) The surprise inspections are conducted periodically by Senior Officers to check the proper functioning of the dispensary.

(d) In view of the above stated position, the question does not arise.

Infant Mortality Rate

950. SHRI CM. IBRAHIM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Infant Mortality Rate (U5MR) in India is still high;

(b) if so, the number of Under 5 Mortalities per thousand live births in India and the comparative figures for 1991, 1981, 1971 and 1951;

(c) the place occupied by India amonst the countries of the world in respect of U5MR and how India is placed amongst the developing countries; and

(d) the reasons for continuing high mortality rate amongst the under five infants, depite the fact that India was first to adopt planned family welfare programme, as early as in 1950s?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM)(a)and (b) The Sample Registration System of the Registrar General of India
provides data on Infant Mortality rate (IMR) and child (0---4 yrs)
Mortality Rate. Infant Mortality rate is defined as the number of deaths of infants (0—1 yrs) per 1000 live births. (0---4 yrs)

Mortality Rate is defined as the number of deaths in the age group 0-4 yrs per 1000 population in that age group. The comparative figures for these rates are given below:

	IMR	Child(0-4 yrs) M.R.
1991	80	26.5
1981	110	41.2
1971	129	51.9
1951	148	Not available

Under five Mortality Rate (USMR) is defined as the probability of dying between birth and exact age five. According to the National Family Health Survey conducted in 1992-93, India's U5MR was 109.3 per 1000 live births.

(c) As per the UNICEF, 'State of the World Children-1998' out of the 191 countries ranked in descending order for their estimated U5MR in 1998, India ranked 49th. The U5MR of selected developing countries is shown in the table at Annexure A.

(d) The major reasons for the high mortality among children include prematurity, acute respiratory infactions including pneumonia and diarrhoea. Maternal anemia due to inadequat maternal nutrition, low birth weight, illiteracy and poverty are some of the important contributing factors.

Population Stabilization Programmes

951. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Indian Medical Association has blamed the lack of will among bureaucrats and Government's failure in respect of the existing population stabilisation programmes in the country; as reported in the Hindustan Times dated the 14th February, 2000;

(b) whether the private sector in health care has decided to step